



The President's Malaria Initiative (PMI) in Senegal

Background

All Senegalese face the deadly risk of malaria, which is responsible for almost 30% of medical consultations, 20% of hospitalizations, and 25% of deaths in the country's hospitals.

Senegal is one of 15 focus countries chosen to benefit from the President's Malaria Initiative (PMI), a \$1.2 billion, five-year program managed by USAID in coordination with the Department of Health and Human Services (*Centers for Disease Control and Prevention*), the Department of State, and the White House.

Goal

PMI's goal is to reduce by 50% the number of deaths caused by malaria in the 15 African focus countries, by reaching 85% of the most vulnerable groups – primarily pregnant women and children under five years old – with the services, products, and medicines that can save their lives.

PMI coordinates its activities with host country anti-malaria programs and those of other international partners, including: The Global Fund Against AIDS, Tuberculosis, and Malaria; the World Bank's program to support the fight against malaria; the Roll Back Malaria partnership; non-governmental organizations, community groups in particular; and the private sector.



In Brief - Malaria in Senegal:

Population: 11.9 million

Life Expectancy at Birth: 58.5

Number of reported cases of malaria: 1.1 million

Rate of mortality for children less than 5 years: 121/1000 (more than 1 in 10)

Percentage of child deaths attributed to malaria: 28%

Key Interventions

In partnership with Senegal's National Malaria Control Program (NMCP), PMI supports four key intervention strategies for malaria prevention and control:

- Spraying approved, long-lasting insecticides on the interior walls of homes (indoor residual spraying) in targeted districts
- Promotion and distribution of long-lasting insecticide-treated bednets (ITNs)
- Training for medical personnel and community health workers to improve malaria diagnosis and the effective use of life-saving medicines
- Prevention among pregnant women with prophylactic drugs during prenatal care (intermittent preventive treatment)

Activities to Date

- An indoor residual spraying pilot activity, which was carried out from May through August 2007 in the health districts of Nioro, Vélingara and Richard Toll, resulted in 76,279 homes being treated with insecticide, protecting 678,971 Senegalese. The activity largely surpassed the target of 75,000 homes sprayed to protect 500,000 people from mosquitoes carrying malaria.
- A total of 193,851 long-lasting ITNs were freely distributed to young children in Dakar's suburbs participating in the Ministry of Health's National Micronutrient Days campaign in May 2007 and 2,121 others – persons living with HIV/AIDS – received nets in June and July 2007.
- A voucher program to provide subsidized long-lasting bednets to pregnant women and children under five was expanded from the original 20 health facilities in six districts to 199 facilities in 25 districts, covering five of the country's 11 regions. Since the expanded system began operating in May 2007, more than 134,000 pregnant women or parents of young children have already exchanged vouchers – along with a small co-payment – for bednets.
- Marketing support to commercial vendors resulted in the sale of 158,060 full cost ITNs to the general public between June 2006 and December 2007.
- More than 1,000 community health workers at 656 community health huts in nine regions have been trained to implement case management of malaria with artemisinin-based combination therapy drugs (ACTs). An additional 2,705 community health educators from 117 health huts were trained to disseminate messages on malaria prevention and prompt care-seeking.
- Based on an assessment of laboratory capacity, equipment, and needs for regional and district-level health facility-based laboratory services, PMI purchased laboratory equipment and supplies for 80 laboratories in all districts and some regional level facilities and 60 laboratory workers are receiving refresher training.
- PMI supported the Ministry of Health's existing program to provide intermittent preventive treatment (IPT) for pregnant women by revising the prenatal care register to allow recording of IPT doses, purchased disposable cups to facilitate directly observed treatment in health facilities, and implemented supportive supervision to identify and address performance issues.
- A national malaria indicator survey was completed to provide baseline data of current household use of malaria control measures, so that PMI will be able to plan and monitor progress toward its goals.

PMI Financing

For fiscal year 2008, the U.S. Government has allocated \$16 million (7.120.000.000 FCFA) for PMI activities for Senegal. A similar level of funding is expected each year through 2010.

PMI's Next Activities

- Continue to expand community case management of malaria with ACTs to all functional health huts in the country.
- Expand the voucher program to a sixth region, and implement a decentralized system for the exchange of vouchers at the health hut level.
- Carry out a second round of indoor residual spraying in the three pilot districts prior to the 2008 rainy season, along with supplemental spraying in Richard Toll district in March to address the second peak of malaria transmission in communities close to the Senegal River and irrigated areas.
- Work with the NMCP and the Nutrition and Child Survival Division to implement a large-scale long-lasting ITN distribution integrated with the National Micronutrient Days campaign. PMI will contribute more than 700,000 ITNs.
- Implement a second national malaria indicator survey in late 2008 to assess progress to date.